

**COVER PAGE**

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TP

NAME (LAST)	NAME (FIRST)	NAME (MIDDLE)	CITY	CLERK'S DEPT	DAYTIME TELEPHONE NUMBER
SHUMAN	HILARY	BRYANT			
MAILING ADDRESS STREET		CITY	STATE	ZIP CODE	
<i>(Business Address Acceptable)</i>					

Name of Office, Agency, or Court:  
**CITY COUNCILMEMBER**

Division, Board, District, if applicable:

Your Position:  
**COUNCILMEMBER**

▶ If filing for multiple positions, list additional agency(ies)/ position(s): (Attach a separate sheet if necessary.)

Agency: \_\_\_\_\_

Position: \_\_\_\_\_

**2. Jurisdiction of Office (Check at least one box)**

State

County of \_\_\_\_\_

City of **SANTA CRUZ**

Multi-County \_\_\_\_\_

Other \_\_\_\_\_

**3. Type of Statement (Check at least one box)**

Assuming Office/Initial Date: 12 / 14 / 10

Annual: The period covered is January 1, 2009, through December 31, 2009.

-or-

The period covered is \_\_\_\_/\_\_\_\_/\_\_\_\_, through December 31, 2009.

Leaving Office Date Left: \_\_\_\_/\_\_\_\_/\_\_\_\_ (Check one)

The period covered is January 1, 2009, through the date of leaving office.

-or-

The period covered is \_\_\_\_/\_\_\_\_/\_\_\_\_, through the date of leaving office.

Candidate Election Year: \_\_\_\_\_

▶ Total number of pages including this cover page: 7

▶ Check applicable schedules or "No reportable interests."

I have disclosed interests on one or more of the attached schedules:

Schedule A-1  Yes – schedule attached  
*Investments (Less than 10% Ownership)*

Schedule A-2  Yes – schedule attached  
*Investments (10% or Greater Ownership)*

Schedule B  Yes – schedule attached  
*Real Property*

Schedule C  Yes – schedule attached  
*Income, Loans, & Business Positions (Income Other than Gifts and Travel Payments)*

Schedule D  Yes – schedule attached  
*Income – Gifts*

Schedule E  Yes – schedule attached  
*Income – Gifts – Travel Payments*

-or-

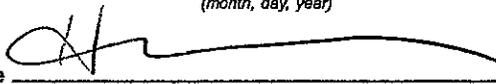
No reportable interests on any schedule

**5. Verification**

I have used all reasonable diligence in preparing this statement. I have reviewed this statement and to the best of my knowledge the information contained herein and in any attached schedules is true and complete.

**I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.**

Date Signed 12/31/10  
*(month, day, year)*

Signature   
*(File the originally signed statement with your filing official.)*

**SCHEDULE A-1  
Investments**

**Stocks, Bonds, and Other Interests  
(Ownership Interest is Less Than 10%)**

*Do not attach brokerage or financial statements.*

<b>CALIFORNIA FORM 700</b> FAIR POLITICAL PRACTICES COMMISSION Name <b>HILARY BRYANT SHUMAN</b>
--

▶ NAME OF BUSINESS ENTITY  
**VINE HILL WINERY**

GENERAL DESCRIPTION OF BUSINESS ACTIVITY  
**WINERY**

FAIR MARKET VALUE  
 \$2,000 - \$10,000       \$10,001 - \$100,000  
 \$100,001 - \$1,000,000       Over \$1,000,000

NATURE OF INVESTMENT  
 Stock       Other \_\_\_\_\_ (Describe)  
 Partnership       Income of \$0 - \$500  
     Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
 \_\_\_\_\_ / \_\_\_\_\_ / **09**      \_\_\_\_\_ / \_\_\_\_\_ / **09**  
 ACQUIRED                                  DISPOSED

▶ NAME OF BUSINESS ENTITY  
**MORGAN STANLEY SMITH BARNEY**

GENERAL DESCRIPTION OF BUSINESS ACTIVITY  
**INVESTMENT ACCOUNT**

FAIR MARKET VALUE  
 \$2,000 - \$10,000       \$10,001 - \$100,000  
 \$100,001 - \$1,000,000       Over \$1,000,000

NATURE OF INVESTMENT  
 Stock       Other \_\_\_\_\_ (Describe)  
 Partnership       Income of \$0 - \$500  
     Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
 \_\_\_\_\_ / \_\_\_\_\_ / **09**      \_\_\_\_\_ / \_\_\_\_\_ / **09**  
 ACQUIRED                                  DISPOSED

▶ NAME OF BUSINESS ENTITY  
**MEDIA RIGHTS TECHNOLOGIES, INC.**

GENERAL DESCRIPTION OF BUSINESS ACTIVITY  
**DIGITAL RIGHTS SOFTWARE**

FAIR MARKET VALUE  
 \$2,000 - \$10,000       \$10,001 - \$100,000  
 \$100,001 - \$1,000,000       Over \$1,000,000

NATURE OF INVESTMENT  
 Stock       Other \_\_\_\_\_ (Describe)  
 Partnership       Income of \$0 - \$500  
     Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
 \_\_\_\_\_ / \_\_\_\_\_ / **09**      \_\_\_\_\_ / \_\_\_\_\_ / **09**  
 ACQUIRED                                  DISPOSED

▶ NAME OF BUSINESS ENTITY

GENERAL DESCRIPTION OF BUSINESS ACTIVITY

FAIR MARKET VALUE  
 \$2,000 - \$10,000       \$10,001 - \$100,000  
 \$100,001 - \$1,000,000       Over \$1,000,000

NATURE OF INVESTMENT  
 Stock       Other \_\_\_\_\_ (Describe)  
 Partnership       Income of \$0 - \$500  
     Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
 \_\_\_\_\_ / \_\_\_\_\_ / **09**      \_\_\_\_\_ / \_\_\_\_\_ / **09**  
 ACQUIRED                                  DISPOSED

▶ NAME OF BUSINESS ENTITY

GENERAL DESCRIPTION OF BUSINESS ACTIVITY

FAIR MARKET VALUE  
 \$2,000 - \$10,000       \$10,001 - \$100,000  
 \$100,001 - \$1,000,000       Over \$1,000,000

NATURE OF INVESTMENT  
 Stock       Other \_\_\_\_\_ (Describe)  
 Partnership       Income of \$0 - \$500  
     Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
 \_\_\_\_\_ / \_\_\_\_\_ / **09**      \_\_\_\_\_ / \_\_\_\_\_ / **09**  
 ACQUIRED                                  DISPOSED

▶ NAME OF BUSINESS ENTITY

GENERAL DESCRIPTION OF BUSINESS ACTIVITY

FAIR MARKET VALUE  
 \$2,000 - \$10,000       \$10,001 - \$100,000  
 \$100,001 - \$1,000,000       Over \$1,000,000

NATURE OF INVESTMENT  
 Stock       Other \_\_\_\_\_ (Describe)  
 Partnership       Income of \$0 - \$500  
     Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
 \_\_\_\_\_ / \_\_\_\_\_ / **09**      \_\_\_\_\_ / \_\_\_\_\_ / **09**  
 ACQUIRED                                  DISPOSED

Comments: \_\_\_\_\_







**SCHEDULE B**  
**Interests in Real Property**  
(Including Rental Income)

Name  
**HILARY BRYANT SHUMAN**

▶ STREET ADDRESS OR PRECISE LOCATION  
25 SKI VILLAGE

CITY  
MOUNT SHASTA

FAIR MARKET VALUE IF APPLICABLE, LIST DATE:  
 \$2,000 - \$10,000  
 \$10,001 - \$100,000  
 \$100,001 - \$1,000,000  
 Over \$1,000,000

ACQUIRED      /      / 09      DISPOSED      /      / 09

NATURE OF INTEREST  
 Ownership/Deed of Trust       Easement  
 Leasehold \_\_\_\_\_ Yrs. remaining       \_\_\_\_\_ Other

IF RENTAL PROPERTY, GROSS INCOME RECEIVED  
 \$0 - \$499       \$500 - \$1,000       \$1,001 - \$10,000  
 \$10,001 - \$100,000       OVER \$100,000

SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of \$10,000 or more.  
 \_\_\_\_\_  
 \_\_\_\_\_

▶ STREET ADDRESS OR PRECISE LOCATION  
\_\_\_\_\_

CITY  
\_\_\_\_\_

FAIR MARKET VALUE IF APPLICABLE, LIST DATE:  
 \$2,000 - \$10,000  
 \$10,001 - \$100,000  
 \$100,001 - \$1,000,000  
 Over \$1,000,000

ACQUIRED      /      / 09      DISPOSED      /      / 09

NATURE OF INTEREST  
 Ownership/Deed of Trust       Easement  
 Leasehold \_\_\_\_\_ Yrs. remaining       \_\_\_\_\_ Other

IF RENTAL PROPERTY, GROSS INCOME RECEIVED  
 \$0 - \$499       \$500 - \$1,000       \$1,001 - \$10,000  
 \$10,001 - \$100,000       OVER \$100,000

SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of \$10,000 or more.  
 \_\_\_\_\_  
 \_\_\_\_\_

\* You are not required to report loans from commercial lending institutions made in the lender's regular course of business on terms available to members of the public without regard to your official status. Personal loans and loans received not in a lender's regular course of business must be disclosed as follows:

NAME OF LENDER\*  
\_\_\_\_\_

ADDRESS (Business Address Acceptable)  
\_\_\_\_\_

BUSINESS ACTIVITY, IF ANY, OF LENDER  
\_\_\_\_\_

INTEREST RATE      TERM (Months/Years)  
 \_\_\_\_\_ %       None      \_\_\_\_\_

HIGHEST BALANCE DURING REPORTING PERIOD  
 \$500 - \$1,000       \$1,001 - \$10,000  
 \$10,001 - \$100,000       OVER \$100,000  
 Guarantor, if applicable

NAME OF LENDER\*  
\_\_\_\_\_

ADDRESS (Business Address Acceptable)  
\_\_\_\_\_

BUSINESS ACTIVITY, IF ANY, OF LENDER  
\_\_\_\_\_

INTEREST RATE      TERM (Months/Years)  
 \_\_\_\_\_ %       None      \_\_\_\_\_

HIGHEST BALANCE DURING REPORTING PERIOD  
 \$500 - \$1,000       \$1,001 - \$10,000  
 \$10,001 - \$100,000       OVER \$100,000  
 Guarantor, if applicable

Comments: \_\_\_\_\_

